

# STATE OF SOUTH DAKOTA

## Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <b>Faith Independent</b>		2. DATE OF FILING <b>9-27-01</b>	
3. FREQUENCY OF ISSUE <b>Weekly</b>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <b>52</b>	3B. ANNUAL SUBSCRIPTION PRICE <b>\$23.10/\$25.00</b>	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <b>P.O. Box 38 Faith, SD 57626-0038</b>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <b>Ravellette Publications, Inc.; Box 788; Philip, SD 57567-0788</b>			
6. FULL NAME OF PUBLISHER: <b>Donald Ravellette</b>			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) <div style="display: flex; justify-content: space-between;"> <span>FULL NAME</span> <span>COMPLETE MAILING ADDRESS</span> </div> <b>Ravellette Publications, I P.O. Box 788; Philip, SD 57567-0788</b>			
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <b>First National Bank-Philip P.O.Box 910; Philip SD 57567</b>  <b>Luella B. Ravellette P.O. Box 375; Philip, SD 57567</b>			
9. EXTENT AND NATURE OF CIRCULATION (See Instructions on reverse side)	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE	
A. TOTAL NO. COPIES (Net Press Run)	1000	1000	
B. PAID AND/OR REQUESTED CIRCULATION	110	112	
1. Sales through dealers and carriers, street vendors and counter sales.	705	702	
2. Mail Subscription (Paid and or requested)	815	814	
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	10	10	
D. FREE DISTRIBUTION	10	10	
1. BY MAIL, CARRIER OR OTHER MEANS	835	834	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	140	138	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	25	28	
F. COPIES NOT DISTRIBUTED	1000	1000	
1. Office use, left over, unaccounted, spoiled after printing			
2. Return from News Agents			
G. TOTAL (Sum of E, F1 and F2 -- Should equal net press run shown in A)			
SIGNATURE AND TITLE OF PUBLISHER, BUSINESS MANAGER OR OWNER <div style="display: flex; align-items: center;"> <div style="flex: 1;"> <p>I swear that the statements made by me above are correct and complete.</p> </div> <div style="flex: 2; text-align: center;"> </div> </div>			

State of South Dakota

County of Harrison



Sworn to before me this 28th day of

September 2001

Halle Albrecht

Notary Public

**MY COMMISSION EXPIRES:**

My commission expires 2-15-07

Donald Ravellette, Box 633, Philip, SD 57567-0633

